

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

APPLICATION FOR PERMIT  
BAYFIELD COUNTY ZONING DEPARTMENT  
Date Stamp (Received)  
OCT 20 2014  
Bayfield Co. Zoning Dept.

ENTERED  
Permit #: 14-5408  
Date: 10-24-14  
Amount Paid: \$100 10-23-14  
Refund:

\$100

TYPE OF PERMIT REQUESTED: ☒ LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER

Owner's Name: James & Evonne Pedersen  
Address of Property: 2500 Crested Ridge Rd, Minnetonka, MN  
20560 Pioneer Rd  
City/State/Zip: Cable WI 54821  
Telephone: 630 242-6302  
Cell Phone: 612 616-6857

Contractor: Rick Gruel  
Authorized Agent: (Person Signing Application on behalf of Owner(s))  
Rick Gruel  
Agent Phone: 715 798-3633  
Agent Mailing Address (include City/State/Zip): 13040 E. Leonard School Rd  
Cable WI 54821  
Plumber: 616-6857  
Written Authorization Attached: ☒ Yes ☐ No

PROJECT LOCATION: Legal Description: (Use Tax Statement)  
1/4, 1/4 Gov't Lot 7 Lot(s) 1 CSM 1082 Vol & Page 7, 25 Lot(s) No. Block(s) No. Subdivision:  
Section 32, Township 44 N, Range 6 W Town of: Grand View  
Lot Size: Acreage: 1.15

☒ Shoreland ☐ Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? ☐ If yes--continue  
☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage ☐ If yes--continue  
Distance Structure is from Shoreline: feet  
Distance Structure is from Shoreline: feet  
Is Property in Floodplain Zone? ☒ Yes ☐ No  
Are Wetlands Present? ☐ Yes ☒ No

Value at Time of Completion \* include donated time & material: \$ 21,000

Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Well
<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Ceiling</u>	<input type="checkbox"/>
<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/>
<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input checked="" type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it) Length: Width: Height: Proposed Construction: Length: Width: Height:

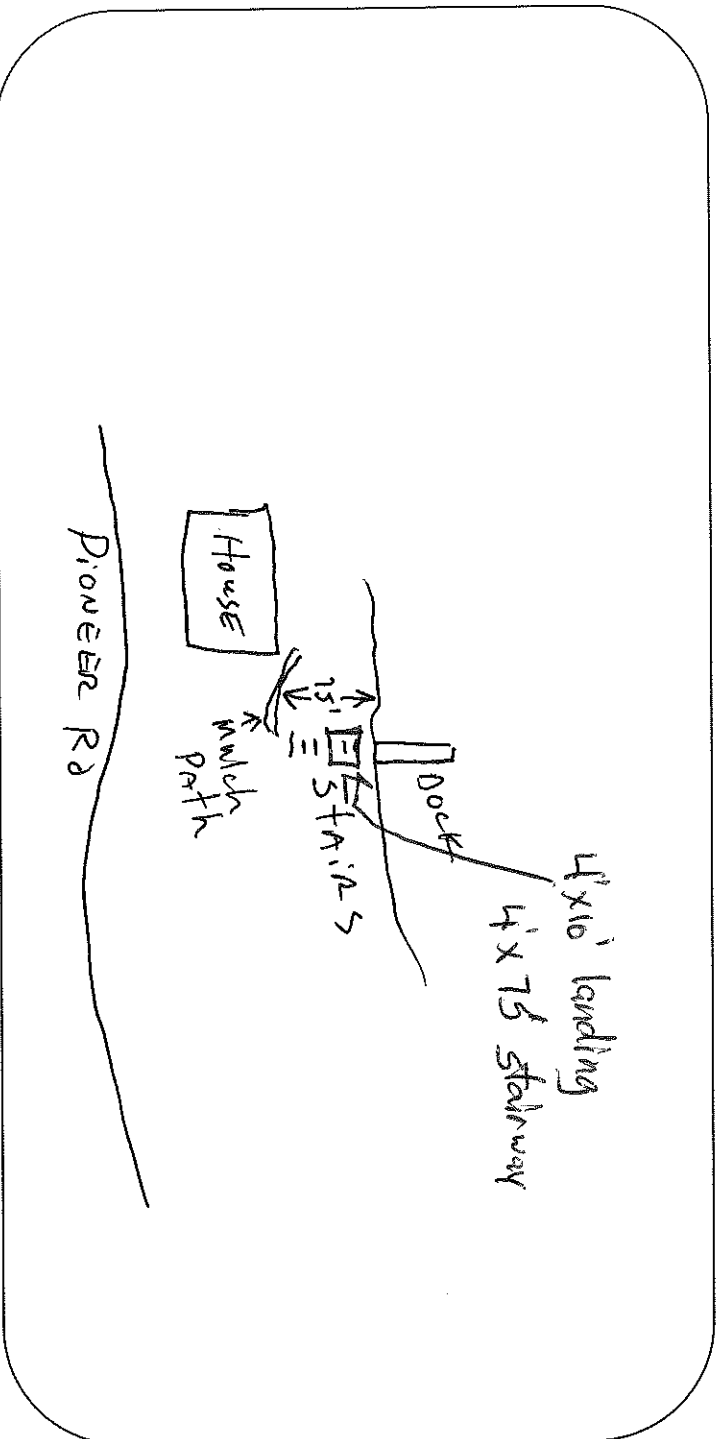
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)	<input type="checkbox"/>	( X )	
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	<input type="checkbox"/>	( X )	
<input type="checkbox"/> with Loft	<input type="checkbox"/>	( X )	
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> with a Porch	( X )	
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Porch	( X )	
	<input type="checkbox"/> with a Deck	( X )	
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Deck	( X )	
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> with Attached Garage	( X )	
	<input type="checkbox"/> Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/> Mobile Home (manufactured date)	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify)	( X )	
	<input type="checkbox"/> Accessory Building (specify)	( X )	
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	( X )	
Rec'd for Issuance			
OCT 24 2014	<input type="checkbox"/> Special Use: (explain)	( X )	
	<input type="checkbox"/> Conditional Use: (explain)	( 4 x 10 )	40
Secretarial Staff	<input checked="" type="checkbox"/> Other: (explain) <u>stairway/walkway to lake</u>	( 4 x 75 )	300

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):  
(if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)  
Authorized Agent: Rick Gruel  
(if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  
Address to send permit Rick Gruel, 13040 E Leonard School Rd,  
Cable, WI 54821  
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE  
If you recently purchased the property send your Recorded Deed  
Attach  
Copy of Tax Statement  
Date 10-16-14

Look below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction  
(2) Show / Indicate: North (N) on Plot Plan  
(3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)  
(4) Show: All Existing Structures on your Property  
(5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)  
(6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond  
(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	150 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	130 Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	NA Feet	Setback from Wetland	NA Feet
Setback from the South Lot Line	NA Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the West Lot Line	50 Feet	Elevation of Floodplain	NA Feet
Setback from the East Lot Line	50 Feet		
Setback to Septic Tank or Holding Tank	NA Feet	Setback to Well	NA Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:	
Permit Denied (Date):		Reason for Denial:			
Permit #: 14-0408	Permit Date: 10-24-14				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record:	Zoning District (R-1)				
Mortgage Requirements.		Lakes Classification (1)			
Date of Inspection: 12-23-14	Inspected by: Mr. Fuchtel	Date of Re-Inspection:			
Conditions: Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)					
Forth/Stairway may not exceed 4' in width. Must use best management practices to prevent erosion or siltation of lake/lake lands.					
Signature of Inspector: Michael Stucke		Date of Approval: 10-24-14			
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>	